Companion Document For

ANSI ASC X12N 278 4010A1 (Health Care Services Review Information – Request for Review and Response) Receipt from

Alabama Medicaid

The Health Insurance Portability and Accountability Act (HIPAA) requires that Alabama Medicaid, and all other health insurance payers in the United States, comply with the EDI standards for health care as established by the Secretary of Health and Human Services. The ANSI ASC X12N 278 implementation guides have been established as the standards of compliance for Health Care Services Review Information – Request for Review and Response transactions. The implementation guides for each transaction are available electronically at www.wpc-edi.com.

The following information is intended to serve only as a companion document to the HIPAA ANSI ASC X12N 278 implementation guide. The table contains specific requirements to be used for processing data in the Alabama Medicaid Management Information System (AMMIS).

The use of this document is solely for the purpose of clarification. This document supplements, but does not contradict, any requirements in the ANSI ASC X12N 278 implementation guide.

Note: The information in this document is subject to change. Please refer to the version number and effective date located in the footer of this document for the latest information available. A copy of the most current version of this companion document can be obtained from the internet at http://www.medicaid.state.al.us/HIPAA/index.htm.

THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO CHANGE.

ITEM#	LOOP	SEGMENT NAME	LANGUAGE
1.			Alabama Medicaid will send Health Care Services Review Information data in upper case.
2.			The 278 data will utilize the basic character set as defined in Appendix A of the 278 Implementation Guide. In addition to the basic character set, the '@' symbol from the extended character set may also be utilized.
3.			Delimiters will be: tilde (~) for segment separators, asterisk (*) for data element separators, and a colon (:) for component data element separators.
4.			All dates on the 278 transaction will be valid calendar dates in the appropriate format based on the respective qualifier and corresponding date format defined in the implementation guide.
5.			Alabama Medicaid will only return one transaction type (records group) per interchange (transmission); a submitter must submit only one GS-GE (Functional Group) within an ISA-IEA (Interchange).
6.			Alabama Medicaid will only return one transaction per functional group; only one ST-SE (Transaction Set) within a GS-GE (Functional Group).
7.			AMMIS is expecting the return of A 997 Functional Acknowledgement.
8.		Interchange Control Header	'ZZ' will be sent as the Interchange ID Qualifier (ISA05), which is associated with the Interchange Sender ID (ISA06).
9.		Interchange Control Header	'752548221' will be sent as the Interchange Sender ID (ISA06).
10.		Interchange Control Header	'ZZ' will be sent as the Interchange ID Qualifier (ISA07), which is associated with the Interchange Receiver ID (ISA08).
11.		Interchange Control Header	The Provider Submitter ID assigned by Alabama Medicaid followed by the appropriate number of spaces to meet the minimum/maximum data element requirement of 15 bytes will be populated in the Interchange Receiver ID (ISA08).
12.		Functional Group Header	GS08 should be populated with '004010X094A1' and all changes per the addenda be incorporated in the 278 transaction.

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ITEM#	LOOP	SEGMENT NAME	LANGUAGE
13.	2010B	Requester Name	If a National Provider Id (NPI) has been assigned, NM108 will be populated with the value of 'XX' and NM109 will be populated with the Provider's NPI.
14.	2000E	Dependent Level	Dependent Level information is not used by Alabama Medicaid and will not be returned within an Health Care Services Review Information transaction.